

04 cr 30011-MAP

FILED
IN CLERK'S OFFICE
2005 MAR 14 A 10:58
U.S. DISTRICT COURT
DISTRICT OF MASS.

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Jose Antonio Garcia
19 Sachem Street
Springfield MA 01108

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☒ Signature ☐ Agent

B. Received By (Printed Name) ☐ Addressee

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes

If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number

(Transfer from service label)

PS Form 3811, August 2001

Domestic Return Receipt

102596-02-M-1540

7003 2260 0006 8591 9123